

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000101211

**Entity Name:** UNITED VIDEO & TELECONFERENCE CENTER OF SOUTH FLORIDA, INC.

**FILED**  
**Jan 08, 2015**  
**Secretary of State**  
**CC3810959515**

**Current Principal Place of Business:**

1218 SE 3RD AVENUE  
FORT LAUDERDALE, FL 33316

**Current Mailing Address:**

1218 SE 3RD AVENUE  
FORT LAUDERDALE, FL 33316

**FEI Number:** 20-0317627

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BUSH, JOHN S  
8181 WEST BROWARD BOULEVARD  
350  
PLANTATION, FL 33324 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name HOUSE, WAYNE  
Address 1218 SE 3RD AVENUE  
City-State-Zip: FORT LAUDERDALE FL 33316

Title VP  
Name SCHANZER, JOYCE  
Address 1218 SE 3RD AVENUE  
City-State-Zip: FORT LAUDERDALE FL 33316

Title ST  
Name SUSSKIND, LAURIE  
Address 1218 SE 3RD AVENUE  
City-State-Zip: FORT LAUDERDALE FL 33316

Title D  
Name RAPPAPORT, LISA  
Address 1218 SE 3RD AVENUE  
City-State-Zip: FORT LAUDERDALE FL 33316

Title D  
Name STERNBERG, SUSAN  
Address 1218 SE 3RD AVENUE  
City-State-Zip: FORT LAUDERDALE FL 33316

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** LISA RAPPAPORT

**DIRECTOR**

**01/08/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date